Department of Labor and Industries Electrical Licensing & Certification PO Box 44460 Olympia WA 98504-4460 360-902-5269 www.Lni.wa.gov



INSTRUCTIONS FOR COMPLETING APPLICATION FOR **ELECTRICIAN EXAMINATION**

RECIPROCAL ELECTRICIAN CERTIFICATE

Attached is the state of Washington application for the journeyman or specialty electrician's certificate examination or for a reciprocal electrician certificate. To avoid delays in the processing of your application, please ensure that you have

nclude	ed all of the items on the checklist provided below: (Applications received without all the information will be denied.)
	Complete the entire application including the work history portion.
	Date and sign the application in the Applicant's Signature block.
	Include the \$75.60 fee. Make checks payable to: Department of Labor and Industries
	Supply original Affidavits of Experience, unless already on file with the department.

NOTES

- Verification of your experience must be submitted on an **Affidavits of Experience** form and must be **notarized**. The Affidavits of Experience form must be completed by:
 - An authorized representative for the electrical contractor; or
 - Your Training Director if you are enrolled in a formal apprenticeship program.

See RCW 19.28 and WAC 296-46B-945 for additional information on qualifying for the Washington electrician examination.

- To be accepted, all experience must have been legally obtained under the requirements of RCW 19.28, or as required in the state where the electrical work was performed, see WAC 296-46B-945.
- No self-verification of electrical training experience will be accepted.
- Washington hours will not be credited if you did not have a current electrical training certificate. RCW 19.28.161 (2) is very clear that you must have an electrical training certificate to learn the electrical trade.
- All General Journeyman applicants must have 8,000 hours of experience with at least 4,000 of that being in new commercial/industrial installation.
- All Residential, Pump & Irrigation, Sign, Limited Energy, HVAC/Refrigeration, and Nonresidential Maintenance Specialty Electrician applicants must have 4,000 hours of experience in the appropriate specialty.
- All Domestic Well, HVAC/Refrigeration-Restricted, Nonresidential Lighting Maintenance & Retrofit, Residential Maintenance, Restricted Nonresidential Maintenance, Appliance Repair, Equipment Repair and Door Gate & Similar Systems Specialty Electrician applicants must have 2,000 hours of experience in the appropriate specialty. (See WAC 296-46B-945 & Table 945-1 for important information.)
- **Reciprocal Applications:** You must submit a copy of your current Alaska, Arkansas, Utah, Colorado, Wyoming, Montana, North Dakota, South Dakota, Nebraska, Minnesota, or Massachusetts electrician's certificate. The reciprocal agreement is limited to (01) general journeyman electricians.
- You will be notified by mail if your application is approved or denied. If your application is approved the department will mail your approval letter with the contact information for the exam contractor. A separate fee for the electrical examination must be paid directly to the exam contractor. You will be responsible for scheduling your examination with the exam contractor. You can obtain information to study for the examination on the electrical website under Exam Information.
- Allow at least 4 weeks processing time under normal circumstances.
- Once you successfully pass the examination or get approved for a reciprocal certificate the department will mail your certificate to you within approximately 4 weeks.
- You must keep your electrical training certificate current until you pass the examination. If you take and pass a specialty electrician examination, you will also need to maintain your electrical training certificate, if you work outside the scope of that specialty. (Example: You have a residential electrician certificate but you want to work on a commercial job; you must have an electrical training certificate and work under the proper supervision.)

MAIL APPLICATION AND FEE TO: **Department of Labor and Industries Electrical Licensing & Certification** PO Box 44460 Olympia WA 98504-4460 360-902-5269 www.Lni.wa.gov



APPLICATION FOR ELECTRICIAN EXAMINATION OR RECIPROCAL ELECTRICIAN **CERTIFICATE**

ENCLOSE A CHECK OR MONEY ORDER PAYABLE TO: Department of Labor and Industries

FEE: \$75.60 NOTE: A separate fee for administering the examination must be paid directly to the exam contractor. Name (Last name, first name, middle initial) **Birth Date**

Mailing Address			Social Securit	y Number
City	State	Zip Code	Daytime Phor	ne (Include area code)
Join the electrical listserv for email updates & notices	at www.lni.wa	.gov/Main/Listservs/Elec	<u>trical.asp</u> or by	providing your
email address here:				
I am applying for:	nation			
Reciprocal Electri				
I am applying for the certificate type checked below: (see WAC 296-4	6B-920 for scope of work	details)	
(01) General Journeyman		(07) Nonresidential M	I aintenance	
(02) Residential		07A) Nonresidential L	ighting Mainten	ance and Retrofit
(03) Pump and Irrigation		(07B) Residential Main		
(03A) Domestic Well	= `	(07C) Restricted Nonre	sidential Mainte	enance
(04) Signs	= `	(07D) Appliance Repair	r	
(06) Limited Energy System	= `	(07E) Equipment Repair		
(06A) HVAC/refrigeration Limited Energy Syst		(10) Door, Gate, and S		•
(06B) HVAC/refrigeration - Restricted		10) Door, Guic, and	Similar Systems	,
Have you previously been a certified electrician or trained	_	=	= =	No
Is this your first application for an electrician exam or rec			Yes .	No
Are all of your affidavits of experience already on file wi	•			
Yes, then you do not have to submit additional a		erience.		
No, then you must submit additional affidavits o	=	41		
All applications and documents submitted must be original	als and become	the property of the departr	nent.	
Employment History:			n +	
Name of employer	-	ate om	Date To	
Address	Ci		State	Zip Code
				1
Position—Job Duties				-
Name of employer		ate om	Date To	
Address	Ci		State	Zip Code
Address		ity	State	Zip Code
Position—Job Duties	I			
I declare under penalty of perjury under the laws of the	ha State of Wa	shington that the forceing	g is true and as	arroot
Date Applicant's Signature	ne State of Was	smington that the forgoing	g is ti ue anu co	niett
Approved?				
E R Yes No Reason Code Cross	s-ref. with prev. cert	tificate #: A/C U ₁	pdate hours?	Initials Date

Approved?									
E□ R□	Yes	No	Reason Code	Cross-ref. with prev. certificate #:		A/C	Update hou	irs? Initials	Date
	Yes	No	Reason Code	From	То		A/C	Initials	Date

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AFFIDAVIT OF EXPERIENCE

(Time frame cannot exceed 24 months per affidavit) Update fee of \$44.90 required if not submitted with renewal

Please read this information before completing the affidavit form below:

- There can be no errors, whiteouts, alterations or additions on this form and you must submit the original. Print clearly.
- The department cannot credit hours worked during any times that the electrical training certificate or electrical contractor license were not active. Do not report any such hours on the affidavit. Each time frame requires a separate affidavit.
- An affidavit needs to be filled out for each continuous time frame of hours worked. If the trainee stops doing electrical work for any period of time, that time frame ends and a new one begins. Each time frame requires a separate affidavit.
- See WAC 296-46B-920 about scope-of-work for electrical specialties. All training hours must be separated and submitted in the proper category.
- Work in the (01) category requires supervision by a (01) journeyman electrician in a ratio of 1 electrician to 1 trainee.
- Work in the specialty categories requires supervision by a journeyman or specialty electrician in a ratio of 1 electrician to 2 trainees.
- If the experience is from out of state you must provide verification of your experience as defined in WAC 296-46B-945 (5-8).
- Electrical training hours gained in specialties requiring less than 4,000 hours (2 years) for certification may not be credited toward qualification for journeyman electrician. See WAC 296-46B Table 945-1 for details.

PRINT nan										affirm and certify that
	me of Administr	ator/Master Electi	rician, Authoriza	ed Electrical Co	ontractor'.	s Representa	tive or a		_	Director Washington as an employee of
	PRINT name	of trainee		Training Certific	cate or So	cial Security	No.	nas wor	KCU III	washington as an employee of
								perform	ing el	ectrical installations inspected
	PRINT name o	f company or train	ing program		UBI or	license num	ber	•	Ü	•
under RCV	W 19.28 conti	nuously from		**	to			**	a	and that the work was performed
·a. 🗆	750/	□ 1000/		ay Year	337	Month	Day	Year		
_	75% or	☐ 100% number of hour	-	•	aer a wa	asnington (erune	a journey	man,	master or specialty electrician,
in the category and the number of hours indicated be Hours Category				C10	Hours			Categor	v	
	(01)		mmercial/Nev	v Industrial				(07)	-	residential Maintenance
	(02)	Residential		, industriar				(07A)		residential Lighting Maintenance
	(03)	Pump and Irr	rigation					(07B)		dential Maintenance
	${}$ (03A)	Domestic We	-					(07C)		ricted Nonresidential Maintenance
	(04)	Signs	, ii					(07D)		iance Repair
	(06)	Limited Ener	ov System					(07E)		pment Repair
	(06A)		geration Limite	ed Energy				(10)		, Gate, and Similar Systems
	(06B)	_	geration - Rest					(10)	Door	, Gute, and Similar Systems
I hereby c		_			ie and a	ccurate t	n the l	est of m	v kno	wledge. I acknowledge that the
•	•								•	0.28 & WAC 296-46B.
Date		Signature of Ad	lministrator/M	aster Electricia	an, Autho	orized Electi	ical Co	ntractor's	Repres	sentative or approved Training Director
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